

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/587,446

FILING DATE

7-25-06

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		2				
4		1				
5		1				
6		1				
7	1					
8	1					
9	1					
10	1					
11	1					
12	1					
13	1					
14	1					
15		1				
16		1				
17		1				
18		1				
19		1				
20		1				
21		1				
22		1				
23		1				
24		1	CANCELED			
25			1			
26				1		
27				1		
28				1		
29				1		
30				1		
31				1		
32				1		
33			1			
34			1			
35			1			
36			1			
37			1			
38			1			
39				1		
40				1		
41				1		
42				1		
43				1		
44				1		
45				1		
46				1		
47				1		
48				1		
49				1		
50				1		
TOTAL IND.	9	↓		↓		↓
TOTAL DEP.	16	←		←		←
TOTAL CLAIMS	25					

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51				1		
52				1		
53				1		
54				1		
55				1		
56			1			
57				1		
58				1		
59				1		
60				1		
61				1		
62				1		
63				1		
64			1			
65				1		
66				1		
67				1		
68				1		
69				1		
70				1		
71				1		
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90						
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92						
93						
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.		↓	9	↓		↓
TOTAL DEP.		←	38	←		←
TOTAL CLAIMS			47			